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FACSIMILE COVER SHEET

September 26, 2006

Receiver: Examiner Robert E. Mosser
Group Art Unit 3712

FAX #: 571-273-8300

Sender: Chereyce R. Brown, Patent Assistant to:
David P. Olynick

Our Ref. No.: IGT1P376/P-227
Application No.: 09/880,474

Re: Response to Office Action w/ IDS

Pages Including Cover Sheet(s): 14

MESSAGE:

Please see the attached documents:

Amendment w/ one month extension fees; and
IDS w/1449 Form.

The Director is authorized to charge the one month extension and IDS filing fees in the amount of \$300.00 to Deposit Account No. 500388 (Order No. IGT1P376).

CONFIDENTIALITY NOTE

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SEP 26 2006

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of: Benbrahim

Attorney Docket No.: IGT1P376/P-227
(formerly IGTECH.0013P)

Application No.: 09/880,474

Examiner: Mosser, Robert E.

Filed: June 12, 2001

Group: 3712

Title: METHOD AND APPARATUS FOR
SECURING GAMING MACHINE OPERATING
DATA**CERTIFICATE OF FACSIMILE TRANSMISSION**

I hereby certify that this correspondence is being transmitted to the U.S. Patent and Trademark Office, Attention: Examiner Mosser at facsimile telephone number (571) 273-8300 on September 26, 2006.

Signed: 
Cherylce Brown**AMENDMENT TRANSMITTAL**Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Transmitted herewith is an Amendment in the above-identified application.

The fee has been calculated as shown below.

| | Claims After Amendment | | Highest Previously Paid For | Present Extra | Small Entity Rate Fee | Large Entity Rate Fee |
|--|------------------------------|-------|-----------------------------------|------------------|--------------------------|--------------------------|
| Total Claims | 18 | MINUS | 15 | 0 | x 25 = | x 50 = 0 |
| Independent Claims | 3 | MINUS | 4 | 0 | x 100 = | x 200 = 0 |
| Multiple Dependent Claim Present and Fee Not Previously Paid | | | | | | |
| Total | | | | | \$ | \$0 |

- ☒ Applicant(s) hereby petition for a ONE month extension(s) of time to respond to the aforementioned Office Action.
- ☒ Applicant(s) believe that no (additional) Extension of Time is required; however, if it is determined that such an extension is required, Applicant(s) hereby petition that such an extension be granted and authorize the Commissioner to charge the required fees for an Extension of Time under 37 CFR 1.136 to Deposit Account No. 500388.
- ☐ Enclosed is our Check No. _____ in the amount of \$ _____ to cover the additional claim fee and/or extension of time fees.
- ☒ Please charge the required fees, or any additional fees required to facilitate filing the enclosed response, to Deposit Account No. 500388 (Order No. IGT1P376).

Respectfully submitted,
BEYER WEAVER & THOMAS, LLP
David B. Olynick
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